

10/08/17 U.S. PTO  
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02728702

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 03500.016232

First Named Inventor or Application Identifier

HARUO FUJII

Express Mail Label No.

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

|   |  |
|---|--|
| 1. <input type="checkbox"/> Fee Transmittal Form<br>(Submit an original, and a duplicate for fee processing)  | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)            |
| 2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.   | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary) |
| 3. <input checked="" type="checkbox"/> Specification Total Pages 45   | a. <input type="checkbox"/> Computer Readable Form (CRF)   |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 11  | b. Specification Sequence Listing on:  |
| 5. <input type="checkbox"/> Oath or Declaration Total Pages _____   | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or  |
| a. <input type="checkbox"/> Newly executed (original or copy)   | ii. <input type="checkbox"/> paper   |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br>(for continuation/divisional with Box 17 completed)   | c. <input type="checkbox"/> Statements verifying identity of above copies                                      |
| i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). |  |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76  |  |

## ADDRESS TO:

Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

## ACCOMPANYING APPLICATION PARTS

|   |  |  |
|---|--|--|
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))                                       | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement<br>(when there is an assignee) | <input type="checkbox"/> Power of Attorney       |
| 11. <input type="checkbox"/> English Translation Document (if applicable)                                       | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449         | <input type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> Preliminary Amendment  |  |  |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized) |  |  |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)         |  |  |
| 16. <input type="checkbox"/> Other: _____   |  |  |

## 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No. \_\_\_\_\_/\_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

## 18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **05514** (Insert Customer No. or Attach bar code label here) or  Correspondence address below

|         |           |          |  |
|---------|-----------|----------|--|
| NAME    |           |          |  |
| Address |           |          |  |
| City    | State     | Zip Code |  |
| Country | Telephone | Fax      |  |

| CLAIMS | (1) FOR  | (2) NUMBER FILED | (3) NUMBER EXTRA | (4) RATE                      | (5) CALCULATIONS |
|--------|--|------------------|------------------|-------------------------------|------------------|
|        | TOTAL CLAIMS<br>(37 CFR 1.16(c))   | 20-20 =          | 0                | X \$ 18.00 =                  | \$ .00           |
|        | INDEPENDENT CLAIMS (37 CFR 1.16(b))  | 1-3 =            | 0                | X \$ 84.00 =                  | \$ .00           |
|        | MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))                 |                  |                  | \$280.00 =                    | \$               |
|        |  |                  |                  | BASIC FEE<br>(37 CFR 1.16(a)) | \$ 740.00        |
|        |  |                  |                  | Total of above Calculations = | \$ 740.00        |
|        | Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28). |                  |                  |                               |                  |
|        |  |                  |                  | TOTAL =                       | \$ 740.00        |

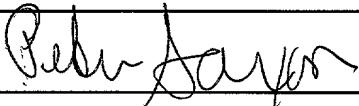
## 19. Small entity status

- a.  A small entity statement is enclosed
- b.  A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c.  Is no longer claimed.

20.  A check in the amount of \$ 740.00 to cover the filing fee is enclosed.21.  A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a.  Fees required under 37 CFR 1.16.
- b.  Fees required under 37 CFR 1.17.
- c.  Fees required under 37 CFR 1.18.

| <b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b> |   |
|--|---|
| NAME   | PETER SAXON   |
| SIGNATURE  |  |
| DATE   | February 27, 2002   |